

# California State Journal of Medicine

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## EDITORIAL POLICY

The editorials appearing in this Journal, as in all other official organs, are intended to reflect the policy and program of the organization. The original article department is to a limited extent interpreted as an Open Forum. The editorial policy toward articles of this character will be very liberal. The responsibility for the language, method of presentation and the statements made in each article rests with the author and not with the State Medical Society. Brief comments and constructive criticism on original articles are invited.

## THE SEMI-CENTENNIAL OF THE STATE SOCIETY

The fiftieth annual session of the Medical Society of the State of California, held in San Diego on May 10-12, was notable in many respects. The session was the culmination of the year's administration of the retiring president, Dr. John C. Yates, of San Diego, and the wonderful reception accorded the Society by its president and the San Diego County Society was a matter of frequent comment. The association of three such men as Dr. Yates, the retiring president, Dr. John H. Graves, the incoming president, and Dr. Henry H. Brainerd, the president-elect, is a matter for congratulation. Never were the affairs of the State Society in better hands, and never was the prestige and the influence of the State Society at so high a point. In this connection must be noted, too, the election by the Society of Dr. W. E. Musgrave as full-time secretary, an election fraught with the promise of great progress and of great unification and strengthening of the work of the State Society.

With some seven hundred members in attendance, and the presence of nearly an equal number of ladies, it was a foregone conclusion that the

social program of the session would be notable, and such was the case. The entertainment provided by the San Diego County Society was heartily appreciated and enjoyed by the entire convention. The hospitable and cordial program carried through by the ladies of San Diego was one of the most charming and noteworthy features of the week. No effort was spared to please and instruct the doctors and their ladies, and in stating that these efforts were deeply appreciated and will not soon be forgotten, we are but voicing the unanimous conviction of the seven hundred members in attendance.

A visitor from an Eastern state who had attended several state society meetings in various parts of the country during the past year called particular attention to the uniformly high-class programs and snappy discussions heard in all of the sections. The character of these programs will be reflected in the papers to appear in the Journal in the next few months.

The House of Delegates decided to extend the time of the annual session to four days, and the next meeting in May, 1922, was set for the Yosemite. With better than one in five of the membership in attendance this year, at San Diego, and with a growing recognition on the part of everyone of the value and pleasure of these conventions, a record-breaking attendance can be confidently predicted for next year. Detailed reports of the fiftieth annual session, together with the minutes of the House of Delegates, will appear in the July issue of the Journal. Once more attention of authors is called to the fact that all papers presented at the State Society session thereby become the property of the Journal and cannot be published elsewhere without permission from the Journal. Those papers which are not accepted for publication by the Journal will be returned to the writers promptly.

### LEAGUE LUNCHEON AT CORONADO

The San Diego Union of May 12, in a lengthy article, describes the League Luncheon as the outstanding feature of the Fiftieth Annual Convention of the State Medical Society. "More than one thousand medical men and their wives packed the dining-room of the Hotel Del Coronado at the meeting of the League for the Conservation of Public Health, and noted speakers vigorously attacked 'quackery' in all its forms, and urged continuous progressive effort on the part of the medical profession to protect the sick and infirm from imposition by incompetent pretentious cultists."

Even to those who have contributed largely to the phenomenal progress of the League and kept in constant touch with its many activities, the remarkable review of the League's performances by Dr. Dudley Smith, the president of the organization, was full of inspiring information. As Dr. Smith said, "There is no one prominently engaged in promoting public welfare work in California today; there is no one worthily holding important public office in this state today that is not aware of the effective and salutary work which the League is doing."

The League is no longer regarded as an experiment, but is recognized as an important fact and factor in the field which it so uniquely fills. Beginning with its first test in 1918, down to the present hour, it has furnished and delivered the goods. In supporting or opposing issues it has not been governed like some transient organizations by what seemed to be at the moment popular. It has taken a positive stand on the side of a question not because it was popular or unpopular, but because it believed it to be right. In every instance the right has prevailed.

Dr. Smith reviewed the successful work of the League against Social Health Insurance in the 1918 campaign, the legislative battles of 1919, the state-wide campaign of 1920, and the recent contests at Sacramento, during which the League decisively defeated the formidable forces arrayed against modern medicine. As Dr. Smith's address will be published in an early issue of the Journal, further comment is unnecessary at this time.

Dr. Smith was followed by Mr. H. F. McInturff, the executive secretary of the Oregon unit of the League for the Conservation of Public Health. The performances of the League in Oregon, as eloquently presented by the executive secretary, demonstrated, as he said, "That the plan of the League is practical and effective, and with personnel of competent caliber can be applied anywhere to solve the present and future problems that confront the medical profession."

Dr. W. E. Musgrave, chairman of the League's section on Advancement of Medical Education and Science, gave an interesting summary of the varied work of the major function of the League—"Hospital Betterment." This important paper will also appear in a future issue of the Journal.

Dr. Donald Jackson Frick gave an impressive address upon "The Civic Responsibility of the Medical Profession," in which he pointed out

how futile a thing individual effort is and how present problems can only be met by a united medical profession. The conclusion that he reached was applauded by all—"It is the duty of each and everyone of us to give the best that is in him to the League for the Conservation of Public Health. It is founded on right principles; it is guided by the men of ideals who have forgotten they owned coats or gloves—follow their lead, believe in them and take orders like a soldier. Write or talk direct if you have complaints. Get into the spirit of this great movement, and be assured that you are showing the highest type of patriotism in shouldering the whole of your civic responsibility."

The surprise feature of the League luncheon was the presentation of a beautiful silver fruit and flower bowl to Mr. and Mrs. Hartley F. Peart, by the combined membership of the League and the State Medical Society. Presentation speeches were made by President Dr. John C. Yates, for the Medical Society, and Dr. Dudley Smith, for the League, in which both emphasized the valuable services rendered by Mr. Peart in advancing and protecting the interests of the medical profession.

When Mr. Peart was called to the platform to receive the gift he received an ovation.

The attitude of those who were fortunate enough to be present may be summed up in the concluding words of Dr. Smith, "Only those physicians and surgeons who are ineligible or who are wholly indifferent to the fact that an increasing number of sick people are being treated, or rather maltreated, by the unqualified and by ignorant hostile cultists can consistently refuse to join the League."

### STATE LECTURE BUREAU

Attention of county societies is called to the fact that the State Society has prepared a list of lecturers and subjects available for any county society in the state which desires to secure them. Ask the secretary for this list.

### PACIFIC COAST MEDICINE

In the medical history of the United States we have been awakened by the great war to a realization that, in the words of Emerson, "We have listened too long to the courtly muses of Europe." "Our day of dependence, our long apprenticeship to the learning of other lands, draws to a close." We have found that American medicine does not need to sit at the feet of foreign instructors. We have demonstrated, and the demonstration is continuing, that originality and progress are characteristic of American medicine. The tradition of European leadership is broken and may never again be re-established.

There is an instinctive feeling among us, on the Pacific Coast, in turn, that our medical thought and interest center on the Atlantic seaboard. To a great extent that is true and will remain true for a considerable time. And yet the time is at hand in which we must recognize that medical science on the Pacific Coast is abreast with

## NOTICE

### POTTER METABOLIC CLINIC

At a recent meeting of the Board of Directors it was voted to change the name of this clinic from that of Memorial Laboratory and Clinic to the Potter Metabolic Clinic, in honor of its founder, the late Nathaniel Bowditch Potter. The clinic is housed in a special wing of the Santa Barbara Cottage Hospital. Dr. W. D. Sansum is its present director.

## Clinical Department

### "NEUROTIC" ASTHMA

By

F. F. GUNDRUM, M. D., Sacramento.

For many centuries the "nervous" origin of asthma was considered indisputable. In later years, with the better understanding of chemical (anaphylaxis) and reflex exciting causes, the nervous mechanism has been allowed somewhat to recede into the background.

My attention was recalled to this phase of the disease by the following case, decidedly unusual as far as my experience goes.

#### Case History—

H. J., single, age 56. No serious diseases; heavy smoker, five cigars a day for thirty years; heavy drinker; claims to have drunk a quart of whisky every day for twenty years. His brother says he thinks this figure a little high, but considers his daily average to have been well over one pint. Present illness began seven months ago with severe cough and cold. Did not clear up completely. Four months ago began to have severe attacks of asthma, lasting two to five days, only partially relieved by vigorous drug therapy.

Two months ago during a severe asthmatic attack, an active alcoholic psychosis appeared. For the first two or three days the delirium alternated with rational intervals of from one to three hours. During the periods of mental clearness this patient wheezed violently. His chest showed the usual expiratory prolongation with sonorous rales. When the mental condition became clouded and the patient actively delirious, the bronchial spasm disappeared, leaving the chest with only the medium and large rales of a chronic bronchitis.

This alternation of clear mind with asthma, and delirium without asthma, occurred some half dozen times during three or four days. He then became continuously hallucinated. The asthma has not yet returned.

Capital National Bank Building.

### CASE HISTORIES FROM THE CHILDREN'S DEPARTMENT, UNIVERSITY OF CALIFORNIA MEDICAL SCHOOL AND HOSPITALS

1921 Series. Case No. 6. 1914. Female, American, age eight years. No. 8007. L. C.

**Family History:** Father and mother living and well. Father had been subject to attacks of indigestion and had just recovered from a case of "grippe." There was a strong family history of tuberculosis. L. C. was one of seven children.

**Past History:** She was a full term, normal delivery child. She had always been a well baby with the exception of having had measles and a few intestinal upsets, but none of any severity.

**Present Illness:** Four months before entering the hospital child had had a daily temperature for three weeks and since that time she had been running an irregular temperature. Parents said that for a day she would be apparently all right and the next day have a temperature. Sometimes temperatures were accompanied by a chilly feeling and at other times had high temperature, was thirsty and drowsy, but did not have chilly feeling. The week previous to her entrance she had been having rather high temperature and every other day had had a chill which lasted for thirty minutes to an hour. This was followed by a high temperature which lasted from twelve to eighteen hours and then became normal.

**Physical Examination:** On entrance the child had a pale, muddy complexion, flushed face and apathetic expression. She showed signs of having lost considerable amount of weight. Her tissue turgor was poor, her skin dry and the mucous membrane rather pale, though her cheeks were flushed. Her teeth were in poor condition and the gums rather spongy and bled rather easily. Tongue was coated and tonsils were enlarged, and there was a good deal of muco-purulent secretion in her posterior nasal pharynx. There were many superficial cervical glands, both anterior and posterior group. Glands in her axilla and groin were also palpable. Her chest was poorly clothed, breathing was not rapid, chest was resonant throughout, but in the back on auscultation there were numerous coarse rales on both sides. Heart area was slightly enlarged to the left. Heart sounds were clear, second sound was entirely replaced by a loud blowing, systolic murmur which had its greatest intensity at the apex. The veins over her chest and abdomen were distinctly visible. Abdomen was full and soft, not tender. The liver was enlarged to 6 cm. below the costal margin and was firm, hard and not tender. The spleen was felt 10cm. below the border of the ribs in the nipple line and reached to within 5 cm. of the mid line. It was hard, firm and not tender. There were no other masses felt in the abdomen. There was no fluid. Her genitalia were normal. Her extremities were normal except for a loss of subcutaneous fat. Her reflexes were rather sluggish. She had no abnormal reflexes.

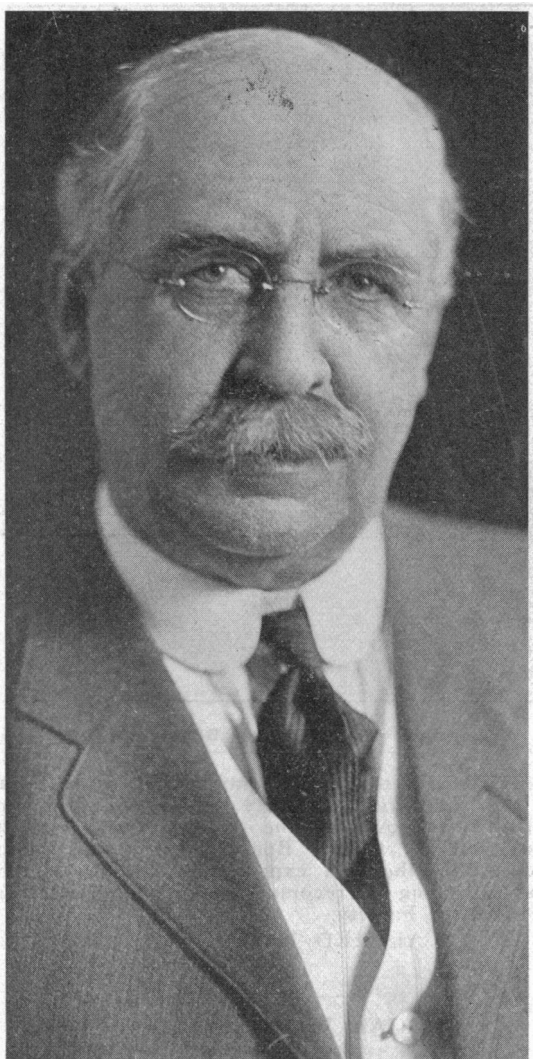
**Laboratory Findings:** Von Pirquet reaction was negative. Wassermann on her blood was negative.

**X-ray Examination:** Her chest showed considerable peri-bronchial root gland enlargement and some peri-bronchial thickening. The blood picture showed a marked reduction in the hemoglobin and red blood cells with a relative increase in the polymorphonuclear leucocytes, though there was no increase in the number of white blood cells. On several occasions the white blood cells were below normal. Her differential blood counts ran as follows:

On examination of the smear, tertian malaria organisms were found in two stages, segmenting and segmented forms. This gave the

**Diagnosis** of the case, which was that of tertian malaria. Undoubtedly during the previous four months she had been suffering from this infection, which accounted for the large size of her liver and

Date	Hb. % Dare	Red Blood Cells	White Cells	Neutro- philes	Eosin- ophiles	Baso- philes	Lympho- cytes	Large Monos & Transition
Oct. 2	..	3,904,000	6,300	60	0	0	23	17
" 4	49	3,944,000	5,660	68	0	0	23	9
" 5	..	3,568,000	7,700	52	0	0	30	18
" 16	60	4,184,000	10,900	43	0	1	26	30
" 22	69	3,392,000	16,000	68	2	1	22	7



WILLIAM BREAKEY LEWITT

sity of California Medical School. From that time until 1913, when he retired as Professor Emeritus, he held that professorship and stimulated study and research in the subject of the diseases of children.

Doctor Lewitt's contributions to medical literature were of a sound, progressive character, always scholarly and stimulating to students and physicians alike. He was a member of the Nu Sigma Medical Fraternity and of the Alpha Omega Alpha Medical Honor Society.

Doctor Lewitt was a man of great personal magnetism, a man loved and trusted by men and one whose passing leaves "an empty space against the sky." He leaves a widow and son and daughter, for whom the whole medical profession and Doctor Lewitt's many friends and admirers will always have a feeling of the deepest sympathy in their bereavement. He will always be remembered as a man who grew with the advancements in his profession and was a leader whom the medical profession in California honored and respected.

### New Members

Hall, J. Howard, Sacramento; Haake, C. H. G., Kennett; Shoemaker, H. R. D., Lindsay; Briggs, W. R., Sacramento; De Laney, C. O., Sacramento; Smith, H. McVickar, Santa Ana; Yeagle, Roland P., Santa Ana; Donaldson, A. D., Loma Linda; Hill, A. J., Riverside; Morrison, H. E., Banning;

Landon, G. S., San Bernardino; Connell, J. A., San Bernardino; Campbell, C. R., Loma Linda; Beeson, H. O., San Bernardino; Hill, M. W., Redlands; Fiegel, F. X., San Bernardino; Gage, A. T., Redlands; Francis, Raymond T., Oxnard; Barbour, N. P., Stockton; Bulpitt, J. Muncey, Modesto; Nightingale-Bulpitt, E. Z., Modesto; Wolfson, L. H., Modesto; Hensel, L. M., Modesto; Dahleen, H. E., San Jose; Parien, R. H., Gilroy; Pierson, Frederick H., San Jose; Gelder, Edgar E., Los Angeles; Straub, Paul F., Los Angeles; Goodenow, Norman H., Sierra Madre; Smith, W. Burr, Los Angeles; Seaver, Homer C., Los Angeles; Malkin, George M., Los Angeles; Hara, H. J. H., Moneta; Rapaport, Hyman, Los Angeles; Gaulden, Lewis, Los Angeles; Sutton, Irwin C., Los Angeles; Johnson, Elmer H., Los Angeles; Bachhuber, C. A., Los Angeles; Bennett, Edwin S., Los Angeles; Hoskins, Greg, Long Beach; Dean, James R., Los Angeles; Mellman, Clarence, Los Angeles; Grubbs, Robert B., Santa Monica; Chamberlain, Frank C., Los Angeles; Tower, I. O., Los Angeles; Ott, Clarence T., Whittier; Parizek, Frank J., Los Angeles; Jones, David N., Long Beach; Exelby, P. B., Los Angeles; Ames, E. W., Los Angeles; Sasso, John A., Los Angeles; Applegate, Chas. F., Norwalk; Napheys, Wm. D., Los Angeles; Williams, P. M., Los Angeles; Force, O. O., Monrovia; Bulpitt, Frederick, Los Angeles; Smith, Gerald F., Los Angeles; Ayres, Samuel, Los Angeles; Denton, William L., Randsburg; Bowman, Paul J., Fort Bragg; Scudder, Royal, Fort Bragg; Avey, John L., Los Angeles; Beck, Horace R., Los Angeles; Davenport, J. Dryden, Los Angeles; Doane, Philip S., Los Angeles; Desser, A. Lincoln, Los Angeles; Fehrens, Gail, Inglewood; Foote, Charles G., Long Beach; Guidinger, W. R., Long Beach; Heffelfinger, M. A., Los Angeles; Holman, W. Frank, Los Angeles; Ingham, Samuel D., Los Angeles; Kaplan, Max, Los Angeles; Koebig, Walter C., Los Angeles; Lijedahl, E. N., Los Angeles; Mann, H. H., Los Angeles; Merritt, Robert E., Los Angeles; Nichols, J. Norton, Los Angeles; Opp, Paul A., Los Angeles; Norris, Wm. J., Los Angeles; Symonds, Cleon W., Pasadena; Travis, Hartman P., Los Angeles; Van Meter, J. N., Burbank; Warner, Horace E., Los Angeles; Franklin, Blake, Los Gatos; Davis, A. F., Soquel; Weir, John J., Loma Linda; Callanan, Joseph I., San Francisco; Cook, Orrin S., San Francisco; Gottschalk, Adolph, San Francisco; Hobdy, W. C., San Francisco; Horner, Warren D., San Francisco.

### Transferred

Osburn, Priestley, P., from Orange County to San Diego County; Trimble, Harold G., from Placer County to Alameda County; Gray, Roscoe N., from San Joaquin County to Alameda County; Wayland, Clyde, from Santa Cruz County to Santa Clara County.

### Deaths

BECKH, G. C.—Died in San Francisco, April 21, 1921, of chronic mitral regurgitation. Age 64.  
ANDERSON, PAUL J.—Died April 25, 1921. Was a graduate of Cooper Medical College, San Francisco, 1910. Was a member of the Medical Society, State of California.  
SUNBURT, WALTER I.—Died in San Francisco, April 10, 1921. Was a graduate of the College of Physicians & Surgeons, San Francisco, 1899. Licensed in California, 1899. Age 55. Influenza broncho pneumonia cause of death.  
LEWITT, WM. B.—Died in San Francisco, April 25, 1921, from chronic myocarditis. Age 63. Was a member of the Medical Society, State of California.